

**Mailing Address:**

New Hampshire Board of Nursing  
78 Regional Drive, BLDG B  
PO Box 3898  
Concord NH 03302-3898



**Location**

78 Regional Drive, Bldg. B  
Concord, N.H. 03302-3898  
Telephone:  
Nursing: (603) -271-2323  
Nurse Assistant: (603) -271-6282

# State of New Hampshire

## New Hampshire Board of Nursing

### Newsletter

**Board Members**

Gail Barba, Public Member  
Term Expires 12/1/2003

Margaret Franckhauser, A.R.N.P.  
Vice Chairperson  
Term Expires 5/10/2003

Harley Featherston, Public Member  
Term Expires 5/10/2003

Stanley J. Plodzick, Jr., R.N.,  
Chairperson  
Term Expires 5/10/2001

Geraldine Stone Donahue, R.N.  
Term Expires 5/10/2001

Mary Lou Asbell, R.N.  
Term Expires 5/14/2003

Tricia Duff, L.P.N.  
Term Expires 5/10/2003

Linda L. Compton, R.N.  
Term Expires 5/10/2001

Constance Theberge, L.P.N.  
Term Expires 11/16/2003

**Office Staff**

Cynthia Gray, M.B.A., B.S.(n), R.N.  
Executive Director

JoAnn Allison, M.S., R.N.  
Assistant Director, Nursing Education

Margaret Walker, M.B.A., B.S.(n), R.N.  
Program Specialist IV

M. Lee Leppanen, M.N., B.S.N., J.D.  
Investigator, Prosecutor

Kathryn Dickson  
Executive Secretary

Susan Goodness  
Administrative Assistant

Kim Cicchetto  
Executive Secretary

Sheila Stolte  
Senior Accounting Technician

Carol Coulsey  
Secretary II

Susan D. Kane  
Secretary II

Debbie Emerson  
Secretary II

Kathryn Crumb  
Secretary II

Guy Alling  
Secretary I (PT)

Vacant  
Secretary I (PT)

Debbie Hoos  
Secretary II

# FEATURES this issue:

- Board Highlights
  - Notes from History
  - Questions & Answers
- Legislation 2001
- Message from the Chair
- Day of Discussion
- New Graduates
- Who's License Is It Anyway. . . .
- Notes from the Executive Director
- Licensure & Your Privacy

## NEED INFORMATION

### 24 HOUR, 7 DAY-A-WEEK SERVICES

Dial: 603-271-6599

#### PRESS 1:

To verify a nursing license.

#### PRESS 2:

To verify a nursing assistant license.

#### PRESS 3:

For the Board of Nursing mailing address, telephone number and directions to the Board office.

#### PRESS 4:

For the Bulletin Board.

- Notices, Announcements and General Information.
- Office hours.

#### PRESS 5:

Overview of the licensing by examination (NCLEX) application process.

#### PRESS 6:

For information about the status of an application filed with the Board.

OR

#### FOR DOCUMENTS AND FORMS:

Dial: (603) 271-4969 "Fax On Demand"

OR

#### CONNECT TO THE INTERNET <http://www.state.nh.us/nursing/>

For other information call the Board during scheduled office hours. **DIAL: 603-271-2323 or 603-271-6282**

### OFFICE HOURS

The office is open Monday through Friday  
8:00 A.M. to 4:00 P.M. Eastern Standard Time  
(except for designated holidays.)

Temporary license applications, R.N., L.P.N.,  
and A.R.N.P. are accepted between  
9:00 A.M. and 3:00 P.M.

**NOTE:** A temporary license will be mailed after review of the application. A temporary license is valid for 180 days or until NCLEX or certification examination results are received, a permanent license issued, or Board action. The temporary license also becomes invalid when the application for permanent licensure expires.

## HOLIDAYS OBSERVED 2001 - 2002

May 28, 2001	*November 11, 2001
July 04, 2001	November 22, 2001
September 03, 2001	November 23, 2001
December 25, 2001	

**\*Whereas Veterans Day, the calendar holiday falls on a Sunday November 11, 2001, State offices will be closed on Monday November 12, 2001.**

## DATES TO REMEMBER

### Board of Nursing Meetings

(The ~~third~~ Thursday of each month)

April 19, 2001	July 19, 2001
May 17, 2001	August 16, 2001
June 21, 2001	September 20, 2001

**Open Forum** is the time on the Board agenda for direct communication with the Board. Individuals seeking to address the Board should contact: Cynthia Gray, M.B.A., B.S.(n), R.N. Executive Director, **at least two weeks** before the scheduled meeting time for specific information and guidelines.

## COMMITTEE MEETINGS

### Liaison Committee

(The **fourth** Thursday of each month)

April 26, 2001	July 26, 2001
May 24, 2001	August 23, 2001
June 28, 2001	September 27, 2001

The committee agenda is finalized 10 days before the meeting. Only completed applications are reviewed.

### Practice & Education Committee

Meetings are set as needed. Please contact the Board Office for the next scheduled date.

### Joint Health Council

April 2, 2001
June 4, 2001
September 10, 2001
December 3, 2001

**All meetings are open to the public, and are held at  
78 Regional Drive, Concord, New Hampshire**



## BOARD ACTIVITIES

### Message from the Board Chair

.... Stanley J. Plodzik Jr., R.N.

Unless you have been hibernating, which is understandable given our winter this year, I'm sure you are aware that there is a great deal of activity going on under the State House Dome in Concord! Some of this activity is certain to have a significant impact on the future practice of nursing in New Hampshire. Here's a brief update.

A task force created by the very first Nursing Summit (Summit) in NH, May of 1999, determined that the top 4 priorities included issues surrounding the scope of nursing practice. Specifically, the current law prevents nurses from delegating any nursing activity to anyone other than an individual licensed under the Nurse Practice Act (NPA): A.R.N.P., RN, LPN, NA. A task force led by Ginny Blackmer, RN, and Laurie Harding, RN cited numerous examples, such as, the nurse who is part of interdisciplinary team. The scope and legal authority of the nurse to provide the type of oversight that today's nursing roles require is often unclear.

While mindful of the need to proceed cautiously and collaboratively, the Board moved forward as swiftly as possible to consider the Summit task force recommendations. Numerous revisions to the NPA have been initiated and proposed in House Bill 408 including the components of delegation. As proposed the definition of delegation means, "the transfer of responsibility for the performance of a selected nursing related activity from a licensed nurse authorized to perform the activity or task to someone who does not have the authority." This proposed change in the law is both necessary and essential if nurses are to continue in the role of coordinator, and overseer of patient care.

In today's health care arena, delegation of certain aspects of nursing care is unavoidable because of the need to provide affordable, accessible, quality care to the public. It is inevitable that there is a need to change the way nursing care is provided; however, there are some very important principles or standards that must form the basis for every delegated decision if safe care is to be assured.

Although addressed in the current Administrative Rule, Part 403; these concepts of delegation are not detailed in the law. For example, what may be delegated often ends up in the "it depends category", i.e., what is the complexity of the task to be delegated, what are the care needs of the specific patient or client, what is the educational preparation, skills and abilities of the unlicensed person to whom the task will be delegated? Also, what is the availability and accessibility of essential resources, including supervision? Nursing judgment is and always will be the key element in every delegated decision. The National Council of State Boards published a list of five (5) responsibilities of delegation that provide a strong framework for what eventually will be part of the rules and regulations for this change that the Board will be developing once this legislation passes. These include the:

- Right Task - care that is delegated for a specific patient;
- Right Circumstances - appropriate patient setting, available resources and consideration of other relevant factors;
- Right Person - the right person is delegating the right task, to the right person, and be performed on the right patient/client;
- Right Direction/Communication - clear concise description of the task including objective, limits and expectations; and
- Right Supervisors - appropriate monitoring, evaluation intervention and, as needed, feedback.

There are specific actions, by law, that are beyond the scope of the nurse to delegate even to another licensee. In fact, even without this proposed revision, inappropriate delegation may result in a disciplinary sanction, Nur 215 (d). While some nurses may respond that they do not want to be liable for someone else, such a statement may indicate confusion about liability and accountability or responsibility. When the nurse delegates, within standards established by the Board, the nurse's duty, related to delegation, has been met. The trained, competent, unlicensed person is responsible for performing the delegated task according to the directions of the licensed nurse. The Board fully realizes that a great deal of education will, by necessity, have to accompany any change in the law; however, nurses throughout the State have welcomed this suggested change, and are most anxious to see this pass and become law.

Another proposed change has to do with one of the requirements for licensure: *active in practice*. New Hampshire, among the licensing jurisdictions, has one of the most stringent requirements. In a time of considerable need for more nurses, the Board determined that the 900-hour active in practice requirement might mean a loss of valued resources, the semi-retired professionals, to the labor force in NH. Consequently, the Board has proposed that the current 900 *active in practice* hours be reduced to 400 hours.

Another bill of interest to the Board is Senate Bill 81. Under this bill, a new role of medication technician is proposed. The Board did not introduce the bill. However, in response, the Board met with the group proposing the legislation. A task force of stakeholders facilitated by the Board has been established to look at the feasibility of creating an expanded role of the NA instead of creating a whole new category of health worker. This expanded role would include medication administration. The Board believes this was a very logical approach, given the fact that NAs are licensed and have good observational skills. If approved, this expanded role would in certain settings, facilitate the role of the licensed nurse. More time would be available for the assessment and evaluation of the effect and efficiency of the drugs administered to a patient versus doing the actual administration. Additionally, this expanded NA role would create career options for the 10,000 NAs licensed in NH. See page 10 of this newsletter for more information about SB 81.

By the way, the Board has also proposed in House Bill 408, the addition of two new NA members to the Board since we do represent this invaluable population of licensees under the NPA, and hopefully will soon be seeking NAs interested in this new and exciting opportunity. Most futurists agree that if nursing is to keep up with the demands for nursing services in this 21st Century, we must change or else. Going beyond the known and comfortable is never easy. However, as the State Board of Nursing we have important contributions to make during these uncertain times. We are currently reviewing all of our past practices as well as the rules and regulations, to determine if they are indeed contemporary and are not contributing further to the shortages and retention issues facing us. With over 18,000 sites on a web search dealing with the nursing shortage alone, there is certainly no lack of information or opinions here for sure! If you want current information on these or any other proposed changes, check out the Board web page, in the Bulletin Board section, at [www.state.nh.us/nursing/](http://www.state.nh.us/nursing/)

Any of the Board members would be happy to answer your questions and concerns as we work creatively at new approaches in meeting the health care needs of New Hampshire citizens.



# BOARD ACTIVITIES

- continued -

Board Activities  
October 1,2000- March 31,2001

- Board Members welcomed the newest member: Harley Featherston. The Governor and Council confirmed the appointment of Mr. Featherston as a public member. Mr. Featherston is a resident of Salem.
- Discussion with Maplewood Nursing Home representatives re: NA and medication administration.
- Open Forum Presentation: Overview of the Nursing Summit outcomes.
- Initiated review of the Nurse Practice Act.
- Coordinated meetings exploring the role of NA and medication administration.
- Discussed NCLEX-RN/PN low percent passing for graduates of foreign educational programs.
- Reviewed student complaint regarding dismissal. Noted appropriate policies, grievance procedures and due process were applied.
- Reviewed Health Career Training Associates, LLC program content proposal.
- Discussed recently raised issues regarding the Board's authority for A.R.N.P. scope of practice versus the role of the Joint Health Council related to approval of drugs prescribed by A.R.N.P.s.
- Denied second application for licensure by comparable education because of the applicant's previous failure of the licensing examination by comparable education.
- Continued review and proposed revision of the Administrative Rules.
  - Accepted proposed revisions forwarded from the Nurse Educator's work session.
  - Discussion and continued study of comparable education licensure.
- Proposed and approved amendments to HB 408.

Notes from History:

The following excerpt is reproduced from the Board's records: Board of Examiners Meeting, the 12th meeting of the Board:

Friday, May 5, 1911. Meeting at State House.  
Working session at 8:30 A.M.

Same members present

All the candidates in their places to continue examinations. Some time was spent in conference with the Regent during which he suggested that the meeting of the Board be called some time before the date for examination of candidates and continue one day only. At this time the credentials of the candidates might be examined and approved or rejected, and the questions in the various subjects decided upon. The papers of the candidates to be sent to examiners decided upon at this time.

The candidates completed papers and meeting adjourned

Educational Programs: Approval Status; Initial/  
Continued (\*with Recommendations)

## Nursing Assistant:

Program	Coordinator	Outcome
• Golden View Health Care Center: Meredith, NH	Phyllis Fisher, R.N.C	Continued Approval
• Salem Haven: Salem, NH		Discontinued Approval Substandard HCFA Survey
• Rochester Manor : Rochester, NH	Deborah Vitagliano, R.N.	Continued Approval
• Rockingham County Nursing Home: Brentwood, NH	Claudia Finlay, R.N.	Continued Approval
• Sugar River Valley Regional Technical Center -Newport High School: Newport, NH	Tanya Wilkie, R.N.	Continued Approval
• Newport Adult Education -Sugar Valley Regional Technical Center: Newport, NH	Cathryn Baird, R.N.	Continued Approval
• Aspire Educational: Services LLC:	Bonnie McPhail, R.N. Melanie Hill, R.N.	Initial Approval
• Integrated Health Services of Claremont: Claremont, NH	Heidi Hanley, R.N. C.	Initial Approval
• Seacoast Health Care Center: Hampton, NH	Eileen Piet, R.N.	Continued Approval
• Redirected Energy: Laconia, NH	Kathleen Lord, R.N.C	Initial Approval
• American Red Cross Concord Area Chapter: Concord, NH	Delores Ann Boynton, R.N.	Continued Approval
• Bel Air Nursing Home Goffstown, NH	Kathy Fournier, R.N.	*Conditional Approval

## Registered Nurse Programs

Program	Consideration	Outcome
• Colby-Sawyer College	Consent Agreement: Status Report Focused Site Visit 11/2000	Accepted
• Colby-Sawyer College	Curriculum Change:	Initial Approval
• NHCC: Claremont-Nashua	Cyclical Program Review	*Continued Full Approval

## Registered Nurse

Structured Refresher Course - Continued Full Approval

Program Coordinator

Education & Clinical Consultants:  
Nashua, NH

## BOARD ACTIVITIES

- continued -

### Whose License Is It Anyway?

... Margaret Franckhauser, ARNP, MS, MPH  
... NH Board of Nursing, Vice Chair

**You** are a nurse employed by a great organization. Professional licensing fees are part of your benefit package. It is time for license renewal. **You** receive a notice from the Board of Nursing, and you forward it to the human resource office. Unfortunately, the HR Director is away on vacation, and the material on his/her desk piles up. Weeks **go** by, maybe months. **You** assume, since no one has told you otherwise, that your license is just fine. Several months later, your organization is preparing for accreditation, and it is noted that your license is not up to date. In fact, your license expired four months ago. What happened? It got lost on the HR Director's desk. How could this happen? Can't the Board hold the employer responsible? The nurse, after all, gave it to the employer.

The Board encounters scenarios just like this on a regular basis. Typically, the licensee contacts the Board office in a panic and is surprised to learn that the Board holds the licensee accountable for all that occurred. Why? The answer is simple and grounded in our constitution. A professional license is treated as a property right, which only states have the power to grant. Further, the property is that of the individual licensee, not their employer or any other entity. While the board might agree that the circumstances were unfortunate; the board still holds the licensee completely responsible for her/his **own** license. In addition, the Board has no power over institutions, employers, or other entities and no authority to discipline them.

Why didn't the Board notify the nurse that the license renewal form was not returned, and the license was about to expire? Simply put, it is because the Board had no idea of the intent of the licensee. When a licensee does not return the completed renewal application, the Board has no way of knowing if the individual did not want to renew their NH license, if they have moved out of the area, or if they have died. All the Board knows is that the application was not completed and returned. Keep in mind that there are over 30,000 individuals licensed by the **NH** Board of Nursing. To allow licensees sufficient time to process their application, the Board mails the renewal notice to nurses at least one month in advance of the renewal date.

A nurse is held accountable to their license and the Board for all activity conducted under the nursing license. Should an employer make a request of a nurse outside the parameters of the Nurse Practice Act, the Board holds the licensee accountable. It is the license of the nurse that the Board can discipline, not the license of the employer. Therefore, it is the professional obligation of the nurse to know the Nurse practice Act and conduct their practice within its parameters. The Board staff is always available for consultation on issues and questions.

So, whose license is it? It is yours, and only yours. Along with the privilege comes the responsibility. Application for licensure is not the responsibility of an employer, a recruiter or an educational program. In the example offered above, a licensee might be more comfortable if he/she renewed the license themselves, and then applied for reimbursement from the willing employer afterwards.

### Questions to the Board Scope of Practice

- Can the N.A. insert an indwelling urinary catheter? Can the N.A. irrigate an indwelling urinary catheter? No. Irrigation of an indwelling catheter requires additional education and competencies. Refer to Nur 305 (c) and (d).
- Can immunizations for high risk patients be initiated in the hospital setting? The Board advised that immunization programs must be by physician's order.  
Do basic computer courses meet the continuing education requirements for licensure? No. The Board determined that these courses do not meet the contact hours requirements needed for licensure.
- Is it within the scope of registered nurse practice to suture arteries? No. Additional education is required. Some hospital policies require completion of an RNFA program to assist a surgeon with suturing.
- Is it within the scope of R.N. practice to administer anesthesia, i.e., anesthetizing the skin, administer agents for emergency room procedures? No. The administration of anesthesia or anesthetic agents is not within the scope of RN or LPN practice.
- Is it within the LPN. scope of practice to install BCG into the bladder? Additional education and competencies are required. Refer to the regulation regarding education beyond initial entry-level practice, Nur 305 (c) and (d).
- Does an Alternative Medicine Course satisfy the pharmacology content requirements for A.R.N.P. licensure? No. Courses or content regarding alternative medicine, i.e. herbal supplements meet the continuing educational requirements but do not satisfy the requirements specific to pharmacological content.
- Is it within the R.N. scope of practice to use radiology imaging equipment during placement of PICC lines, specifically fluoroscopy, contrast dye and ultrasound? The Board advised that using fluoroscopy to place PICC lines is within the R.N. scope of practice with proper education pursuant to Nur 305.01 (c) and (d).
- Is it within the N.A. scope of practice to manage a vagus nerve simulator (VNS) in a skilled nursing facility? The Board opined that it is appropriate for N.A. to manage a VNS with appropriate education pursuant to Nur 305.01 (c) and (d).
- Is the collection of blood samples as ordered for **DNA** testing of a convicted sexual offender a violation of nursing ethics? No. It is a violation of licensure to collect blood samples for court-ordered DNA testing of convicted sexual offenders.
- Is it within the LPN. scope of practice to instill medication through the venous central line of a dialysis machine? No. This practice is not within the LPN. scope of practice.
- Is it within the **N.A.** scope of practice to do the following procedures: Sterile wound dressing, urinary catheterization, bladder irrigations, colostomy irrigation, **NG** tube irrigations, I.V. removal, hyperalimentation, pulse oximetry, oxygen therapy? The Board is concerned with the N.A. delegated activities related to some wound dressings, urinary catheterization for indwelling catheters, hyperalimentation and regulating of oxygen therapy flow rates and has determined that these activities are not within the N.A. scope of practice. Bladder, colostomy, NG irrigations, pulse oximetry and I.V. removal require further education and documented competencies pursuant to Nur 301.01 (c) and (d).

## BOARD ACTIVITIES

- continued -

### LICENSURE AND YOUR PRIVACY...

Recent articles in the New Hampshire Sunday News, March 4, 2001, highlighted the issues related to the rights of privacy protection, the right to know and access to information. National and state laws, current and proposed, address the scope and complexity of these rights. The Board of Nursing is charged by law to protect the public from the unsafe, unauthorized, unqualified practice of nursing. So what information will the Board release about a licensee? The Board may release the following information:

- The status of the license.
- The license number.

Note: Board policy requires that a request for a specific license number be forwarded in writing. The request must be signed and dated and identifiable information about the licensee must be included.

- Business address (employer) and phone number unless such address and phone number is also the licensee's home.

Note: This information is as current as the last application processed, e.g., endorsement, reinstatement, and renewal.

- Academic degrees.
- Specialty area of practice.
- Public discipline.

Social Security numbers are not required for license application: initial, endorsement, reinstatement or renewal. Providing this information is optional. The Board uses other data to identify a licensee. All applicants also have the choice regarding the addition of their name and address to the Board's public mailing list. This list is provided upon request to interested individuals/groups, e.g., educational and nursing organizations, potential employers, researchers, publishers.

Licensing status information can be accessed twenty-four hours a day via the Board's Voice Verification System. The license number is required to access this information. An additional twenty-four hour verification service will soon begin via the Board's web page at <http://www.state.nh/nursing/>

Official Verifications are available upon request. The verification fee for L.P.N., R.N. and A.R.N.P. licenses is \$25.00 (Nur 305.02). The N.A. verification fee is \$20.00 (Nur 704.02). A written request or applicable form should be forwarded to the Board office with the appropriate fee, check payable to the Treasurer, State of New Hampshire. Personal or certified checks or money orders are accepted. All fees are non-refundable.

## EDUCATIONAL UPDATES

### BOARD APPROVED: PROGRAM DIRECTORS AND NURSE EDUCATORS

October 1,2000 - March 31,2001

	PROGRAM	NURSING SPECIALITY AREA	APPROVAL DATE
<b>Program Directors</b>			
Lisa McCurley, M.S., R.N.	NHCTC: Manchester-Stratham	Regional Director and Chairperson	October 18,2000
<b>Nurse Educators</b>			
Deborah Gallegos-Petersen, M.S., R.N.	NHCTC:Manchester - Stratham	Adult	October 3,2000
Karen Shinnars, B.S., R.N.	NHCTC:Claremont - Nashua : PN Program	Medical - Surgical	October 3,2000
Deborah Gallegos-Petersen, M.S., R.N.	NHCTC:Manchester - Stratham		October 3,2000
Lisa McCurley, M.S., R.N.	NHCTC:Manchester - Stratham		October 18,2000
Mary Churchman, M.S., R.N.	NHCTC:Manchester - Stratham		October 18,2000
Debra Hastings, M.S., R.N.	Colby - Sawyer College		October 26,2000
Sue Ellen VanNostrand, M.S., R.N.	St. Anselm College		October 26,2000
Joan C. Buddington, M.S., R.N.	NHCTC: Berlin - Laconia		November 28, 2000

## PRACTICE NEWS

Licenses Reported Lost, Stolen or Never Received and Duplicate Licenses Issued (RN., LPN., A.R.N.P., N.A.) for the period of 10/01/00 - 3/3 1/01

### Registered Nurses:

Anastasi-cioli, Lynda	033610-21
Anthony, Donna	044770-21
Barnes, Susan Lynn	029283-21
Barton, Donna	034076-21
Bashaw, Susan	036220-21
Blanchard, Jane	023092-21
Burgess, Sharron	027340-21
Carril, Caroline	042438-21
Cartwright, Shirley	012447-21
Charron, Terri	034032-21
Collins, Tammra	047918-21
Crowley, Karen	041073-21
Edwards, Sharon	015465-21
Ellis-nailor, Deborah	025321-21
Ely, Rebecca	033583-21
Fisher, Denise	034061-21
Hosford Fogg, Julie	034064-21
Fuhs, Carol	038302-21
Gaudreau, Michael	042358-21
Gavrilles, Mary	036369-21
Green, Kristine	036105-21
Guilfoil-dumont, Amy	038255-21
Hayashigawa, Joette	029630-21
Hellwig, Pamela	046059-21
Hendriks, Elizabeth	047568-21
Johnstone, Kim	036739-21
Leclair, Lynne	035804-21
Macomber, Martha	035652-21
Maihiot, Candace	023002-21
McLaughlin, Sharon	039526-21
Michaud, Dennis	045350-21
Montesino, Judelyn	048526-21
Muller, Susanne	044454-21
Nwaji, Patricia	048395-21
O'hanley, Jessica	038223-21
Paula, Elaine	045855-21
Pelletier, L. Jean	036707-21
Powers, Barbara	043908-21
Solik, Patricia	048124-21
Sislane, Margaret	046842-21
Smith, Anna	048075-21
Stredny, Nancy	017014-21
Strand, Constance	034834-21
Strodrey, Diane	034140-21
Sullivan, Patrick	021906-21
Vanloo, Patricia	041942-21
Venning, Matthew	048125-21
Watjen, Tami	042809-21
Winslow, Kathryn	042301-21
Licensed Practical Nurses:	
Beauregard, Jodi	010383-22
St Germain, Star	011866-22
Nowland, Christine	007915-22
Hughes, Karey	011409-22

Hurlbert, April	006864-22
Wilson, Tania	011623-22
Nursing Assistants:	
Adams, Debra	002032-24
Azotea, Alyssa	016930-24
Ball, Lori	018794-24
Barto, Jessica	017248-24
Beaudine, Irene	020802-24
Bellerive, Hilari	021209-24
Bird, Kristine	021871-24
Bodner, Valerie	015098-24
Casey, Debra	021480-24
Cooper, Louise	012989-24
Donnell, Julie	018038-24
Day, Tabatha	021324-24
Demeulle, Christine	016483-24
Field, Deirdre	020910-24
Golden, Neil	016212-24
Huckins, Judith	011618-24
Hunsaker, Pamela	020168-24
Lambert, Karen	014683-24
Landry, Sharonlee	010889-24
Messier, Margaret	018170-24
Moffett, Jane	021787-24
Mudgett, Christine	021985-24
Pavnick, Catherine	018508-24
Pike, Kathleen	021059-24
Poulin, Cheryl	021645-24
Powell, Lavern	021438-24
Rockwell, Sheri	015651-24
Smart, Sonia	011434-24
Smith, Darlene	001067-24
Smith, Tara	017980-24
Steele, Rachel	007527-24
Stuart, Gretchen	004232-24
Swett, Tammy	013210-24
Taylor, Deborah	017339-24
Teahan, Jane	015984-24
Walker, Robin	004043-24
Wheeler, Karen	021782-24
Winterholer, Jaime	017759-24

The following licenses are INVALID; The check received for payment was returned; The licensee was notified of the returned check.

### Registered Nurse:

Chase, Amy	NA
Douglas, Jody	NA
Harriman, Mary	044198-21
Yeomans, Abby	026293-21

### Licensed Practical Nurse:

King, Shawn	011102-22
Mullen, Kathleen	011992-22

### Nursing Assistants:

Barker, Nicole	021735-24
Brennan, Joy	015354-24
Choute, Marie	018590-24
Crease, Tammy	006068-24
Daniel, Judith	019052-24
Dodge, Megan	019988-24
Paye, Ginny	015399-24
Strauch, Laurretta	NA

## Disciplinary Action:

Pursuant to **RSA 326-B:12 V**: Every individual, agency, facility, institution or organization that employs nurses within the state shall report to the Board within 30 days any alleged violations of the Nurse Practice Act (**RSA 326-B: 12, RSA 326-B: 15 and Nur 215.01**). (Bold Added). Violations specific to the Board actions reported below are cited in **RSA 326-B: 12II, Nur 215.01 (b) and Nur 215.01 (d) (1) (2)**.

### RSA 326-B: 12 Disciplinary Action

II. Misconduct sufficient to support disciplinary proceedings under this section shall include:

- (a) The practice of fraud or deceit in procuring or attempting to procure a license to practice nursing;
- (b) Conviction of a felony or any offense involving moral turpitude;
- (c) Dishonest or unprofessional conduct including but not limited to intentionally harming, abusing or exploiting a patient, defrauding or harming the public in matters related to the practice of nursing, willfully failing to maintain accurate and complete nursing records, acts of omission or commission when practicing nursing as set forth in rules adopted by the Board pursuant to **RSA 541-A**, and violating disciplinary orders or settlement agreements approved by the Board; [Amended 1991, 361:1, eff. July 1, 1991].
- (d) Gross or repeated negligence when practicing nursing activities ancillary to the practice of nursing, or any particular aspect or specialty thereof, or an established behavior pattern which is incompatible with the basic knowledge and competence expected of persons licensed to practice nursing or any particular aspect or specialty thereof; [Amended 1991, 361:1, eff. July 1, 1991].
- (e) Addiction to or abuse of alcohol or other habit-forming drugs or substances which render the licensee unfit to practice nursing; [Amended 1991, 361:1, eff. July 1, 1991].
- (f) Willful or repeated violations of any provision of this chapter; any substantive rule adopted by the Board pursuant to **RSA 541-A**, or any other state or federal statute or substantive rule applicable to the practice of nursing. [Amended 1991, eff. July 1, 1991].

In addition to **RSA 326-B:12**, the following shall also be considered acts of misconduct or dishonesty for persons licensed under **RSA 326-B**.

### Nur 215.01(b)

- (1) Accepting a nursing or nursing-related assignment when the licensee knows or has reason to know he or she is unqualified to perform the assignments;
- (2) Leaving an assignment without notifying the appropriate authority, whereby such departure endangers the health, safety and welfare of those individuals entrusted to the licensee's care;
- (3) Violating care recipients' rights, confidentiality, privacy, or records;
- (4) Practicing in a manner that discriminates on the basis of age, race, sex, handicap, national origin, sexual orientation, nature of illness or health status, physical or mental infirmity;
- (5) Misappropriating human or material resources;

- (6) Physical, mental and/or verbal abuse, battery, exploitation, harassment, or neglect of individuals;
- (7) Receiving, or agreeing to receive, fees or other considerations, for influencing the care, activities or records of individuals;
- (8) Failure to maintain standards of practice or education pursuant to **RSA 326-B:2, XIX**;
- (9) Claiming as their **own** another's license pocket-card, or allowing others to use a license card not their **own**;
- (10) Administering therapeutic agents, treatments or activities, or recording of same, in an inaccurate or negligent manner;
- (11) Failure to record or report patient care data, or falsifying or altering records;
- (12) Failure to take appropriate action to safeguard individuals from incompetent health-care, nursing practices, nursing-providers, ancillary personnel or others involved with care-recipients;
- (13) Performing nursing activities or interventions, or providing nursing-related activities beyond the authorized scope of practice;
- (14) Practicing without a current license, or altering a license pocket-card by changing dates, numbers, or any information appearing on a license pocket-card;
- (15) Falsifying any information requested by the Board.

### Nur 215.01(d)

- (1) Delegating activities to individuals when the licensee knows or has reason to know that the individual(s) is not qualified to perform the delegated activity; and
- (2) Failure of licensee to supervise individuals or groups required to practice nursing or provide nursing-related activities under supervision.

### Related Definitions:

**Annulment:** is a Board action upon consideration of a petition whereby a reprimand is removed from the record (Nur 217.01).

**Revocation:** means the termination of the authority to practice nursing or provide nursing-related activities following disciplinary action (Nur 101.48).

**Suspension with Stay:** means the arresting of a suspension order to allow a licensee to practice nursing or provide nursing-related activities under specific stipulations (Nur 101.51).

**Suspension:** means the withholding of the authority to practice nursing or provide nursing-related activities for a specified period of time following disciplinary action (Nur 101.53).

**Reinstatement:** means the reactivation of a license to practice nursing or provide nursing-related activities for a specified period of time following disciplinary action (Nur 101.53).

**Reprimand:** means a disciplinary action taken against a license, noted on the individual record, that does not affect the individuals ability to practice nursing or provide nursing-related activities.

**Voluntary Surrender:** a license may be surrendered at any time; however, the surrender does not preclude any board investigation or action (Nur 216.01 (a) (b)). When surrendered the licensee **no** longer has the rights or privileges associated with the license and cannot practice nursing or provide nursing-related activities.



### Complaints of Licensee Misconduct

....M. Lee Leppanen, R.N., M.N., J.D., Investigator  
Prosecutor for the Board

During January 2000, a revised Complaint Form was made available, see the Spring 2000 newsletter..

This article reviews the information published in the Spring 2000 issue, highlights the essentials of filing a complaint and presents an overview of the investigative process. The first step in initiating a complaint to the Board is to fill out the complaint form. The second very important step, is to mail a legible original form to the Board and mail a copy to the respondent (the alleged violator) at the same time. The latter is required by Nur 204.03 (a). The information requested on the form is extremely important in investigating alleged violations. Incomplete information delays the investigation and, ultimately, the resolution of the case.

Here is what happens when a complaint is filed. It should be noted from the outset that any determinations I make are always subject to review by the Board at its discretion. As a first step, I review the complaint to determine the substance of the complaint and whether it warrants investigation. If so, then a file is opened a letter is sent to the respondent requesting a written statement of his/her view of the incident that precipitated the complaint. I do not discuss the facts of an incident with the respondent over the phone prior to receiving his/her written statement, so please do not advise them to call me. I will call them if a special situation warrants it.

Letters are sent to the witnesses listed on the complaint. Witness letters are not sent to the individual's workplace, so their home addresses must be provided. If necessary additional information or documents from a complainant are requested.

Lastly, when the investigation is complete, I will then determine whether I believe that the violation has been proven by a preponderance of the evidence (ie. more likely than not that the respondent committed the violation.). If the violation is proven, then a decision is made to determine whether that violation warrants disciplinary action and what disciplinary measure is appropriate to the violation. In doing this, I consider what the Board's past actions have been in similar cases.

If the violation appears to require disciplinary action, then the respondent may or may not need to appear at a hearing before the Board. If the violation and facts in the case are straightforward, I may meet with the respondent to negotiate an agreement between them and the board. The agreement sets forth what RSA and Board of Nursing rules the respondent admits to violating and what the discipline may be. These agreements are always subject to approval by the Board and are reviewed at a regular Board meeting. If the Board disapproves the agreement, then the matter will be heard at a hearing scheduled at a later date.

Sometimes negotiating an agreement is not possible, or not appropriate. The latter occurs, for example, when the violation is more than a minor one and there is a lot of conflicting evidence and/or the credibility of the witnesses is in question. At this point, the Board really needs to hear testimony and evaluate the credibility of witnesses. A formal hearing is held.

When the Board has decided to discipline a licensee, the discipline is documented and recorded in the individual's file maintained in the Board's computer database. This means, for example, that when prospective employers call for verification of a license they will be apprised of the disciplinary action and the violation for which it was imposed.

Sometimes a complaint must be dismissed. This occurs, for example, when there is only one witness to an incident, in which case it is a "he-said/she-said situation," or where the only witness is a resident who verbalizes a complaint to staff, but then refuses to provide a statement or can't recall the event at all. Sometimes a violation does not rise to the level for which disciplinary action should be taken but dismissal would be improper. This occurs, for example, when a violation is a onetime occurrence but also raises concerns about the individual's practice (eg. a medication error with no/little effect on the patient.) In this case, a Letter of Concern may be sent to the respondent.

The bottom line is: the information on the complaint form greatly impacts Board investigations, your efforts to file an accurate and comprehensive complaint is necessary. Finally, sometimes it is difficult to determine whether an incident should be reported to the Board. Please call me to discuss these incidents and I will be glad to informally discuss them with you.

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The list of disciplinary actions taken by the Board subsequent to the right of appeal are published in the newsletter. The publishing of this information is a matter of public record. Occasionally, issues arise such as a duplicate name. However; the license number is never duplicated.

(In that vein we apologize to Darlene A. Adams, an RN who is employed in Keene, NH and who does not have an encumbered license.)

License numbers may be identified by the following:

- A license that ends in 21 is an R.N.
- A license that ends in 22 is an L.P.N.,
- A license that ends in **24** is a N.A
- A license that ends in 23 is an A.R.N.P.

Note: The added extension to the 23, indicated the A.R.N.P. category of licensure.

XXXXXX-23-1 Nurse Midwife  
XXXXXX-23-2 Pediatric  
XXXXXX-23-3 Family  
XXXXXX-23-4 Women's Health  
XXXXXX-23-5 Adult  
XXXXXX-23-6 Geriatric  
XXXXXX-23-7 School  
XXXXXX-23-8 Psychiatric-Mental Health  
XXXXXX-23-9 Trauma/Emergency  
XXXXXX-23-10 Neo Natal  
XXXXXX-23-11 Certified Registered Nurse Anesthetist  
XXXXXX-23-12 Acute Care

(refer to <http://www.state.nh.us/nursing/newsletters.html>)

The regulatory authority and structure of the Board of Nursing is established by law, RSA 326-B. The purpose of the Board is to safeguard life, health and the public welfare of the people of the state and to protect the people of the state of New Hampshire from the unauthorized, unqualified, improper application of services by individuals in the practice of nursing (RSA 326-B:1). The powers and duties of the Board are outlined in RSA 326-B:4. Following is an overview of the Board's activities.

# PRACTICE NEWS

- continued -

Disciplinary Action: October 1, 2000 - March 31, 2001

R.N., L.P.N., A.R.N.P., N.A.

NAME	License # Type	Board Action	Date of Action and Term	Statute (RSA) & Administrative Rule (NUR) Reference	City of last known Employer
<b>A.R.N.P.</b>					
Gabai, Ivy	038134-23	Annulment granted	11/16/00 N/A		
<b>R.N.</b>					
Daigle, Edmond L.	037380-21	denied reinstatement	11/16/00 N/A		Portsmouth, NH
Daniels, Susan	039720-21	Suspended	11/16/00 Indef.	RSA 326-B:12 II (c) Nur 215.01 (b)(8) Nur 215.01 (b)(10) Nur 215.01 (b)(13)	Claremont, NH
Durham, Carol	038538-21	Reprimand	11/16/00 N/A	RSA 326-B:12 II (c) Nur 215.01 (b) (11)	Manchester, NH
Jacques, Carole	034090-21	Reinstate w/stip	11/16/00 2Yrs.		Laconia, NH
Marsden, Sherry	045724-21	Suspended	11/16/00 Indef.	RSA 326-B:12 II (C) Nur 215.01 (b)(10) Nur 215.01 (b)(11)	Newton, Mass.
Peck, Wendy	034880-21	suspended	11/16/00 1 Yr.	RSA 326-B:12 II (e) Nur 215.01 (b) (5)	Lebanon, NH
Brennan, Katherine	042730-21	Suspended/stay	12/21/00 2 Yrs.	RSA 326-B: 12 III	Dover, NH
Chang, Deborah	038501-21	Suspendw/stip	12/21/00 3 Yrs.		
Dooley, Linda	033911-21	Suspended	12/21/00 1 Yr.	RSA 326-B:12 II (e) Nur 215.01 (b) (5)	Manchester, NH
Eldred, Julie	034543-21	Reinstate -Suspend w/stay	12/21/00 2 Yrs.		Salem, NH
Griggs, LeeAnn	044076-21	Reinstate - Suspended/stay	12/21/00 3 Yrs.		Manchester, NH
Laflame, Pamela	027060-21	Remove stipulation #III c 11/22/96 SA	12/21/00		Manchester, NH
Wells, Catherine	023050-21	Suspend/*	12/21/00 Indef.	RSA 326-B:12 II (c) Nur 215.01 (b)(5) Nur 215.01 (b)(10) Nur 215.01 (b)(11)	Manchester, NH
Woods, Janet	028733-21	Reinstate w/stay	12/21/00 2 Yrs.		Dover, NH
Feinberg, Debra	044394-21	suspended	1/18/01 Indef.	RSA 326-B:12 II (c) RSA 326-B:12 II (d) RSA 326-B:8-a 1 Nur 215.01 (b) (10) Nur 215.01 (b)(11) Nur 215.01 (b)(15)	Hampton, NH
Hayes, Sheila	025209-21	Removed stip.	1/18/01 N/A		Dover, NH
Laflame, Pamela	027060-21	Remove all stip.	1/18/01 Indef.		Manchester, NH
Moon, LouAnn	048560-21	Suspend w/stip.	1/18/01 2 Yrs.		Concord, NH
Wells, Catherine	023050-21	Suspend/stay	1/18/01 1 Yr.	RSA 326-B:12 II (c) Nur 215.01 (b)(10) Nur 215.01 (b)(11)	Manchester, NH
Chackel-Sciotto, J.	033246-21	Reinstated w/o stip.	2/15/01 N/A		
Chesson, Jan	040712-21	Revoked	2/15/01 N/A	RSA 326-B:12 II (c) Nur 215.01 (b)(5) Nur 215.01 (b)(8) Nur 215.01 (b) (10) Nur 215.01 (b) (11)	Londonderry, NH
Young, Rebecca	013015-21	Reprimand	2/15/01 N/A	RSA 326-B:12 II (c) Nur 215.01 (b)(3) Nur 215.01 (b)(6) Nur 215.01 (b)(10) Nur 215.01 (b)(11) Nur 215.01 (b)(12)	Lebanon, NH
<b>L.P.N.</b>					
Avila, Diane	003957-22	Suspended/w stay	11/16/00 1 Yr.	RSA 326-B:12 II (c) Nur 215.01 (b)(8) Nur 215.01 (b)(10) Nur 215.01 (b)(11)	Londonderry, NH

# PRACTICE NEWS

- continued -

Disciplinary Action: October **1,2000** - March **31,2001**

R.N., L.P.N., A.R.N.P., N.A.

NAME	License # Type	Board Action	Date of Action and Term	Statute <b>(RSA)</b> & Administrative Rule <b>(NUR)</b> Reference	City of last known Employer
Cote, Roberta	007069-22	Reinstate w/stip.	11/16/00 1 Yr.		Manchester, <b>NH</b>
Davis, Brenda	002002-22	Suspended/*	12/21/00 I Indef.	RSA 326-B:12 II (c) Nur 215.01 (b)(5) Nur 215.01 (b)(8) RSA 326-B:8-a 1	Nashua, NH
Moyer, Laura M	010229-22	Revoked	12/21/00 N/A	RSA 326-B:12 II (c) RSA 326-B:12 II (d) Nur 215.01 (b)(5) Nur 215.01 (b)(8) Nur 215.01 (b)(10) Nur 215.01 (b)(11)	Dover, NH
Felton, Jennifer	011849-22	Reprimand	1/18/01 N/A	RSA 326-B:12 II (c) Nur 215.01 (b) (10) Nur 215.01 (b) (11)	Milford, NH
McNicholas, Diane	010191-22	Revoked	1/18/01 N/A	RSA 326-B:12 II (c) Nur 215.01 (b) (5)	Nashua, NH
Bibeau, Paula	009794-22	Suspend	2/15/01 1 Yr.	RSA 326-B:12 II (e) Nur 215.01 (b) (5)	Nashua, NH
Sheehan, Marlene	007897-22	Reinstated w/stip.	2/15/01 1 Yr.	(Not Nursing)	
	N.A.				
Avila, Diane	018709-24	Suspend/w.stip.	11/16/00	RSA 326-B:12 II (c) Nur 215.01 (b)(8) Nur 215.01 (b)(10) Nur 215.01 (b)(11)	Londonderry, NH
Chase, Bonnie	005044-24	Reinstate/w stip.	11/16/00		Keene, NH
Moore, Florence	021663-24	Reprimand WWL	12/7/00	RSA 326-B:12 II (c) Nur 215.01 (b)(14)	Merrimack, NH
Aragones, Conception	015379-24	Voluntary Surrender	1/18/01	RSA 326-B:12 II (c) Nur 215.01 (b)(3) Nur 215.01 (b)(5) Nur 215.01 (b)(6)	Lexington, Ma.
Eathorne, Marion	017947-24	Voluntary Surrender	2/15/01	RSA 326-B:12 II (c) Nur 215.01 (b)(6)	Glenclyff, NH
Hammond, Erica	020993-24	Suspend w/stay 1 year	2/15/01	RSA 326-B:12 II (c) Nur 215.01 (b)(1) Nur 215.01 (b)(3) Nur 215.01 (b)(6) Nur 215.01 (b)(8) Nur 215.01 (b)(13) Nur 215.01 (b)(15)	Lebanon, NH

Abbreviations: Vol.= Voluntary WWL = 2nd Offense = Working without a license Indef.= Indefinitely **FM**=Finding of misappropriation  
Suspend/\*=/until appears before the Board W/Stip = With Stipulations w/o stip = without stipulations

## NAME CHANGE OR ADDRESS CHANGE

PREVIOUS NAME: \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_

**NEW NAME:** \_\_\_\_\_

**OLD ADDRESS:** \_\_\_\_\_

**NEW ADDRESS:** \_\_\_\_\_



## Testimony on **SB 81**

Madam Chairman and members of the committee, my name is Margaret Walker and I am the Program Specialist for the NH Board of Nursing with responsibility for nursing assistant education and licensure for the Board. At its December Board meeting, the Board of Nursing requested the development of a task force to study the possibility of Medication Administration by licensed nursing assistants, after meeting with providers of Long Term Care. The first Task Force meeting was held on January 24, 2001 with representation from Long Term Care, Residential Care, Home Care, Acute Care, Developmental Services, Board of Pharmacy and Bureau of Health Care Facilities. The Task Force identified areas of concern and plans to continue meetings to move toward development of this issue. In order for the Board of Nursing to agree to regulate medication nursing assistants, a program which includes sufficient education and safe guards that provide safe medication administration for individuals receiving nursing care in the State of New Hampshire, would need development. Currently, the Board of Nursing is reviewing current laws and rules and is examining areas of delegation by licensees. Careful and deliberate designs must be researched regarding oversight of the medication administration educational programming, medication error reporting and licensure of the candidates who have completed the requirements. These are necessary steps to ensure safe medication administration for consumers.

In order to develop a quality program, the Board would need to assure care providers involvement in the process of medication error reviews and other quality problems that may occur. Because the needs of consumers are different in the various healthcare settings, rules will need to be written that apply to all of these settings. In addition, the Board of Nursing would need a plan to give a specific license to trained individuals so that consumers, employers and the Board of Nursing could assure qualified staff are providing medication administration.

The cost of implementing this program would include additional staff at the Board of Nursing, additional equipment, licensing computer software modifications and related supplies. Currently there are 10,468 licensed nursing assistants employed in New Hampshire and 56 Nursing Assistant Educational Programs. Approximately **7500** of our licensed nursing assistants work in Long Term Care with the remainder working in Home Care, Hospitals, Residential Care, Schools and Physician Offices. The Board has assumed, (in the financial projections), the providers will apply for the Medication Nursing Assistant Education program approval at a rate of **50** programs in year one and maintenance of 50-60 programs annually in subsequent years. It is also assumed the facilities will provide continuous nursing assistant education for these individuals with Board of Nursing approved programs.

Proposed expenditures are costly and based on assumed figures rather than actual examined needs. The Board of Nursing thus would prefer to continue with the Task Force examination of the Medication Administration issue to base the fiscal planning on information gathered from all of the Provider Community.

The current wording of the Act may cause consumer confusion and the Board of Nursing is in agreement with most of the wording changes of the proposed amendment to HB 81-FN-A. The Board of Nursing is committed to public safety and licenses individualsto provide nursing and nursing related activities, and thus agrees +/or recommends the following changes:

1. Change the title "Medication Technicians" to "Medication Nursing Assistants" and change the title throughout the entire document.

The term "Technician" usually relates to the persons supervised by the Medical Profession. The public has knowledge of the Nursing Assistant profession and thus the consumer would be more knowledgeable of the caregiver's level of education.

2. Include "continuing education program" on lines 13 & 14 (XVII(c) & (d))

Medication administration requires continuing education of new medications and changes in medication administration procedures.

3. Remove the word "scheduled" from page 1, line 31 (RSA 326-B:28-a II(b))

The word "scheduled" usually refers to controlled drugs such as narcotics.

4. Change page 2, line 2-3 to "Medication Nursing Assistants authorized under this chapter shall only administer medications they are delegated to administer."

This change would require Nursing delegation of specific care needs, allow flexibility to certain settings and circumstances and would assure supervision by a licensed nurse for consumers.

5. Change page 2, line 20 to "Effective Date. This act shall take effect 180 days after passage.

It would take a minimum of 180 days to hire personnel, purchase necessary equipment and develop quality programming.

Thank you for the opportunity to speak to this subject.

## Update to House Bill **408: 3/18/2001**

.....Cynthia Gray, Executive Director

These last few weeks have been a flurry of activity over refining the text and language of House Bill 408, the Nurse Practice Act (NPA). The latest proposed revisions to the NPA as it now appears today are posted on the Board's web page and can be accessed through the Bulletin Board link.

There remain some concern expressed relative to delegation and the accountability for the task delegated. The Board believes that Section 33 Liability for Delegation addresses the concern as will proposed revisions to the Administrative Rules. The Rules are the application of the law and are more specific.

Please take time to mull over these proposed changes and how they will affect not only you but the public at large. You are welcome to make comments in writing to the Board of Nursing but more importantly to the legislative Committee hearing this bill. The Board of Nursing believes in this bill and hopes for success in its passage.

Another aspect of delegation, the administration of medications by others will also be addressed through Senate Bill 81. The bill may not come to fruition without successful passage of HB 408. Although separate issues, these two bills may be linked in the future. **UPDATE:** As of March 21, 2001 this bill was amended unanimously passed out of committee.

Note: Revision to the Administrative Rules is currently a work in progress. Proposed changes will be posted on the Board's web site as soon as an initial draft is available.

## NEW GRADUATES

It's that time of year: graduating seniors are preparing to enter the workforce where there is a great demand for their nursing service. The nursing competencies of the new graduate are confirmed by the successful completion of the licensing examination. The results for First-Time Candidates for the graduates from New Hampshire Board approved nursing programs are listed in the following table. Class 1995 - 2000.

NCLEX-RN AND NCLEX-PN PERCENT PASSING 1994 - 1999 FIRST TIME CANDIDATES									
BOARD APPROVED EDUCATIONAL PROGRAMS									
GRADUATING CLASS OF:	1995	1996	1997	1998	1999	***2000	*G	T	P
<b>ASSOCIATE DEGREE:</b>									
NH COMMUNITY TECHNICAL COLLEGE:BERLIN-LACONIA	81.25%	79.40%	72.00%	85.70%	80.00%	81.81%	20	22	18
NH COMMUNITY TECHNICAL COLLEGE:CLAREMONT-NASHUA	87.09%	87.00%	84.00%	72.70%	84.21%	91.66%	25	24	22
NH COMMUNITY TECHNICAL COLLEGE:MANCHESTER	93.33%	92.70%	100%	83.30%	91.90%	97.72%	49	44	43
NH TECHNICAL COMMUNITY COLLEGE:STRATHAM	97.72%	97.00%	90.90%	100%	CLOSED/MERGED				
NH TECHNICAL INSTITUTE:CONCORD	93.44%	95.70%	92.70%	92.50%	95.10%	88.70%	59	62	55
RIVIER COLLEGE-ST. JOSEPH SCHOOL OF NURSING	87.95%	91.00%	85.50%	83.60%	87.95%	86.20%	97	87	75
NCLEX-RN NH % PASSING						86.65%			
NCLEX-RN NATIONAL % PASSING	90.39%	83.67%	87.79%	83.17%	84.72%	83.84%			
<b>BACCALAUREATE DEGREE:</b>									
COLBY-SAWYER COLLEGE	88.88%	91.70%	62.50%	46.20%	78.60%	69.20%	13	13	9
SAINT ANSELM COLLEGE	93.10%	85.50%	82.30%	81.50%	87.09%	91.10%	45	45	41
UNIVERSITY OF NEW HAMPSHIRE	82.69%	74.00%	82.00%	85.30%	92.59%	81.39%	43	43	35
NCLEX-RN NH % PASSING						86.65%			
NCLEX-RN NATIONAL % PASSING	90.39%	83.67%	87.79%	83.17%	84.72%	83.84%			
<b>PRACTICAL NURSING:</b>									
NH COMMUNITY TECHNICAL COLLEGE:CLAREMONT-NASHUA	97.14%	89.70%	85.70%	88.00%	82.60%	89.47%	17	19	17
SAINT JOSEPH HOSPITAL SCHOOL OF PRACTICAL NURSING	97.01%	94.10%	92.20%	87.50%	95.30%	72.20%	41	36	26
NCLEX-PN NH % PASSING						86.32%			
NCLEX-PN NATIONAL AVERAGE	90.39%	83.67%	87.79%	87.32%	86.74%	85.10%			
*** Percent passing calculated on the number tested									
*SOURCE: 2000 ANNUAL PROGRAM REPORT									
NOTE: The number of candidates may vary from the number of reported graduates due to errors in recording school codes. G=Graduated; T= Tested; P= Passed									

The Board for the Registration of Nurses held their first meeting on May 23, 1907. At this meeting 46 nurses were registered in the state. The following copy is taken from the Board's records. The examination is dated June 18, 1907. Note that applicants must respond to not more than 10 questions and male nurses did not answer questions from Division III: Obstetrics.

STATE OF NEW HAMPSHIRE EXAMINATIONS FOR REGISTRATION OF NURSES. First Examination, June 18, 1907. 2:30 P.M.	DIVISION II. GENITO-URINARY CASES. For Male Nurses.
Answer 10 questions but not more. Male nurses must choose at least two questions each from divisions I, II, IV, V; female nurses at least two questions each from divisions I, III, IV, V. Answers in excess of the number required will not be considered. Check the number of each one of the questions you have answered.	5. State how a catheter should be sterilized and cared for. 6. What precautionary measures should a nurse take against infection when caring for a specific case? 7. If stipes over bladder are ordered tell how prepared, applied and how often changed. 8. Mention three ways aside from catheterization by which a patient might be relieved when suffering from retention of urine.
DIVISION I. SURGERY. 1. State how sheets, towels, sponges, instruments and utensils should be sterilized with such facilities as would be found in an ordinary private house. 2. State how the nurse should prepare her hands before assisting the surgeon at an operation or dressing. 3. Give the nursing care of a patient operated on for appendicitis. 4. How should a patient be prepared for ether anesthesia on three hours notice.	DIVISION III. OBSTETRICS. For Female Nurses.
	9. What articles would you tell the prospective mother would be required at the time of confinement (a) for her own use; (b) by the infant.

Today, the national licensing examinations are computerized. These tests, which are psychometrically sound and legally defensible, measure entry-level competencies in four major test plan areas: Safe, Effective Care Environment, Health Promotion and Maintenance, Psychological Integrity and Physiological Integrity.

The test is available year-round. There are no deadlines for application and Board communications with the testing service are transferred electronically. The candidate's eligibility to test is determined by the individual licensing Board and when completed the test results are forwarded directly to the Board. Results are usually received within 48 - 72 hours of testing. In New Hampshire the license is issued within 2 days of receipt of the test results and in the mail within 1-2 days!

A license is required to practice nursing in the state. Temporary licensure is available for eligible new graduates and must be obtained before beginning any employment or any part of new employee orientation.

While holding a temporary license, the new graduate, registered nurse or practical nurse, must work under the supervision of a NH licensed registered nurse. The supervising nurse is responsible for appropriate delegation to the graduate nurse and the graduate nurse is accountable for accepting a delegated task or action appropriately. See Nur 403: DELEGATION.

## Obligations

The basic tenet of New Hampshire RSA 326, otherwise known as the Nurse Practice Act, is to protect public safety. Above all, that is the goal of the NH Board of Nursing. It sounds simple. It is and it isn't.

The phrase "Do No Harm" is one of the basic phrases that we abide by day in and day out. For those of us in the nursing profession it involves obligations far above others. Every day there are obligations to carry out physicians orders without error. We frequently feel the obligation to take a few extra minutes to sit with a patient and his or her family as they struggle with ways of coping with illness.

We should always recognize the obligation to report to their superior the unsafe health care provider who provides substandard care for counseling.. Above all we should always feel an obligation to arrive at work rested with a keen aptitude and a desire to deliver care that is above reproach.

My tenure as the Executive Director of the Board of Nursing has been quite short. I arrived October 23 for a role that required skills that I hadn't even imagined. It has been a wonderful, stimulating time but I have been struck by some of the issues that come to the attention of this office almost daily. For example:

- Staff who have been threatened with abandonment (unfounded I might add) when they refuse mandatory overtime.
- Nurses and nursing assistants who have severe issues with chemical and alcohol addictions, some of which lead to the actual stealing of patients' medications while on duty.
- Concerns from RNs and LPNs regarding scope of practice and delegation issues.

Citing the Nurse Practice Act is one of the obligations of this office to assist the nursing personnel of this state to make the right decision. It is not a job that we take lightly and are always ready to assist you. In turn, you have many obligations. You have an obligation to take care of yourselves in a healthy manner. You must leave your personal problems at home as much as you can, not work more than you feel you can safely do and keep yourself intact personally. Professionally, you have the obligation to act as the mature, responsible adult that you know you are. A professional keeps his/her own biases in check, listens with an open mind, is not afraid to learn new skills but always recognizes the need to be operating legally and competently in the workplace environment. Along that same line you also have the obligation to continue your education. A lunchtime seminar with a drug rep, a day long seminar or a college course pursuant to health care issues are but a few examples to continue your educational means. Lastly, I believe that you have an obligation legislatively. Especially during this session where the Board of Nursing has determined that it is time to contemporize the Nurse Practice Act. You should be following those changes and feel free to comment and encourage others to do the same. Your profession in this state is changing and you have an obligation to be a part of that change.

...Cynthia Gray, M.B.A., B.S. (n), R.N

I urge you all to examine your professional lives and to rise to the occasion each and every minute of every day that you are on duty in! whatever capacity that may be. In that way, you will go a long way fulfilling your obligation to protect the safety of the public.



Meet the Board Staff Seated (left to right)- Kathryn Crumb, Cynthia Gray, Debra Hoos, M Lee Leppanen; Standing (left to right)- Carol Coulsey, Susan Goodness, Guy Alling, Kathryn Dickson, Sheila Stolte, Debbie Emerson, Kim Cicchetto, Susan Kane and Margaret Walker. Missing JoAnn Allison

## Remarks from the Office: Avoiding Licensing Delay. ..

...from Susan Goodness, Administrative Assistant

Approximately one quarter of all applications received daily in the Board office are returned to applicants because of missing information! The application form is a legal document, so Board staff cannot simply fill in or correct information written on or missing on the application.

To avoid delays, please be certain all questions are answered. Be sure that the application information is correct, with all the required information, or if the answer is none, indicate none. Leave no question unanswered and be certain to sign and date the application.

Remember status information about a current license or an application for a first-time applicant is available twenty-four hours a day, seven days a week through the Voice Verification Line. To use this service, just call **603-271-6599**:

- Press 1: To verify a current license, R.N., L.P.N., A.R.N.P.
- Press 2: To verify a current license, N.A.
- Press 6: For information about the status of an application for new licensure.

Don't forget to have your license number or application status ID number ready to use this service. Note: This same information will also soon be available through the Board's web page, so keep checking: <http://www.state.nh.us/nursing/>



**"We're  
Not in Kansas  
Anymore Toto"  
A Day of Discussion with the  
New Hampshire Board of Nursing  
at  
The Grappone Capital  
Conference Center  
June 5, 2001  
8:30 a.m. to 4:00 p.m.  
Nursing Realities in 2001  
Discussions regarding Practice  
in  
New Hampshire**

This **Program** is designed for all  
A.R.N.P., R.N., L.P.N. and N.A. Licensees

During this year's Day of Discussion several speakers will share their perspectives regarding health-care issues and how these issues influence nursing practice and education. This program offers information for all persons providing nursing and nursing-related activities. This is a very timely offering with regards to the revision of the Nurse Practice Act and lively discussion will be encouraged.

Ms. McGunnigle will discuss staffing availability in NH and will focus on the supply of current **nurses** and demands on the profession.

Ms. Brunell will review the issues surrounding recruitment as well as maintaining an adequate work force.

Mr. Parker will provide information about the Institute of Medicine Report on medication errors in nursing practice.

Ms. Everett, Ms. Patton, Ms. Harding and Ms. Blackmer will review the Nursing Summit's work on issues surrounding NH nursing practice with plans and strategies identified at the series of Nursing Summit meetings.

The Board of Nursing members will complete the conference with a panel discussion of current nursing issues, rules and challenges.

### Program

8:30-9 a.m. Registration  
9-9:15 a.m. WELCOME  
Stanley Plodzick, Jr., RN, BS, M.Ed.,  
Chair: Board of Nursing  
9:15-10:00 a.m. Staffing Supply and Demand  
Lisa McGunnigle RN, Esq.  
10:00-10:15 a.m. BREAK  
10:15-11:15 p.m. Attracting and Retaining  
Nurses  
Mary Brunell RN  
11:15-12:15 p.m. Medication errors in Nursing  
Practice--The Institute of Medicine Report  
Lenny Parker RPh.  
12:15-1:15 p.m. LUNCHEON  
1:15-2:00 p.m. Nursing Summit Panel  
Discussion  
The Image of Nursing:  
Donna Marie Everett MS, RN  
Nursing Education:  
Sally Patton MSN, MS, RN  
Expanded Roles:  
Laurie Harding RN &  
Ginny Blackmer MS, ARNP, RN  
2:00-4:00 p.m. The Role of the New  
Hampshire Board of Nursing  
Board Panel Discussion  
Topics: Delegation, Staffing, Rules  
**Are** the rules compatible with current practice?  
What do you do when **you** arrive on duty to a  
"short staffing" issue? How do you  
**define** "abandonment"? How can we recruit more  
nurses and nursing assistants into the profession?  
What are the day to day problems occurring in  
nursing/nursing assistant practice.  
4:00 p.m. Adjournment  
Certificates of attendance will be distributed.  
Contact Hours: **6.0**

**June 5 2001**  
at  
The Grappone Capital  
Conference Center  
The Courtyard Marriot, Concord, **NH**  
Rt **28**, Manchester **NH**  
From **93** take Exit **15**  
Take first right on Commercial Street and  
follow the signs to the facility.  
Park in the back lot for the conference center.

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_

AREA OF PRACTICE: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

(N.A. Licensees) Do you wish a shuttle ride to the State House? Yes No (Please check one).

N.A.s attending the "N.A. Day" Celebration at the State House will receive full contact hours provided they attend the final session of this conference. Shuttle bus transportation to the celebration from the conference is available.

FEE \$50.00 Includes Luncheon  
(N.A.'s) please call Margaret Walker at 271-6349 for information regarding registration scholarships.  
Make check payable to:

TREASURER, STATE OF  
NEW HAMPSHIRE

Send check with registration to:

NEW HAMPSHIRE BOARD OF NURSING  
78 REGIONAL DRIVE BLDG B  
PO BOX 3898  
CONCORD NH 03302-3898

### REGISTER EARLY

#### PRESENTERS

Lisa McGunnigle RN Esq. is currently the Vice President of Health Law and Policy for the NH Hospital Assn. and has been working closely with the current nursing shortages in the State of NH.

Mary Brunell Ph.D., RN is VP of Patient Care Services and Chief Nurse Executive at Elliot Hospital. She was the 1995 recipient of the Mary Adelaide Nutting Award to the Nurse Managers at Beth Israel Hospital and the Nursing Service Leadership Award from the U of Mass-Amherst in 1997. She has held joint faculty appointments at Harvard Geriatric Center, Yale University and University of Massachusetts @ Amherst. She has published work in the Journal of Nursing Administration (1998) and is a member of ANA, AONE and Sigma Theta Tau.

Leon Parker R.Ph. is the NE Director of NCS/UNI-CARE Health Services, Inc. and a practicing pharmacist in NH since 1979. He has been a member of the Board of Pharmacy since 1992 and NH Joint Health Council since 1998 as well as the NH Joint Pharmaceutical Formulary Board, NH Pharmacist Assn and American Society of Consultant Pharmacists.

Donna Marie Everett MS, RN is the Director of Nursing at Havenwood Heritage Heights. She is a member of the AONE, the NH Foundation for Healthy Communities and a task force leader for the Nursing Summit.

Sally Patton MSN, MS, RN is currently a Nursing Director of the inpatient surgical unit and surgical special care unit at Dartmouth Hitchcock Medical Center. She is the President of the NH Nurses Assn. since 1998, a member of the AONE and a task force leader for the Nursing Summit.

Laurie Harding MS RN is currently Clinical Manager of the Visiting Nursing Alliance of VT and NH. She is a member of the Board of Directors of NH Nurses Assn and has co-chaired the NH Summit task force on the Scope of Practice. She has held an Assistant Professor position at Colby Sawyer in the specialty area of Community Health and has worked as a legislative consultant for NH Nurses Assn.

Virginia Blackmer MS, ARNP, RN has been a clinical nurse specialist at Lakes Region General Hospital since 1981. She is currently an Adjunct Asst Professor of Nursing at UNH, an instructor for NHTI, Center for the Advancement of Nursing Practice and a task force leader for the Nursing Summit. In 1999 she was the recipient of the 1999 'Nurse Practitioner of the Year' Award, the 1995 Sigma Theta Tau 'Leadership' Award and the 1994 NH Nurses Assn 'Nurse of the Year' Award.

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AIRPORT

1  
3  
9  
3

EAST SIDE DRIVE

MAYKING REST.

PIZZA HUT  
CANTERBURY RD.

STATE OFFICES

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DONUTS

R.D.

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